



“One HHS”

10 Department-wide Outcome Goals

Mission: To enhance the health and well-being of Americans by providing for effective health and human services and by fostering strong, sustained advances in the sciences underlying medicine, public health, and social services.

1 Increase Access to Health Care

- 1.1 Decrease the Number of Uninsured Children and Adults
- 1.2 Increase the Percentage of Children who Receive Necessary Treatment after Being Identified as Needing Medical or Behavioral Treatment
- 1.3 Reduce Disparities in Health Access and Outcomes
- 1.4 Increase the Availability of Primary Health Care Services for Underserved Populations

2 Improve Health Outcomes*

- 2.1 Reduce Deaths, Incidence and Impact from Chronic Disease
- 2.2 Reduce the Deaths, Incidence and Impact of Infectious Disease
- 2.3 Reduce Incidence and Impact of Injuries and Violence
- 2.4 Reduce the Annual Rate of Suicide, while Decreasing the Proportion of Injurious Suicide Attempts for Youth
- 2.5 Decrease Food-Related Illness and Death
- 2.6 Improve the Diet and Level of Physical Activity
- 2.7 Reduce Tobacco Use Especially among Youth
- 2.8 Reduce Unsafe Sexual Behavior

3 Enhance Health Care Quality and Treatment

- 3.1 Expand the Health Research Base
- 3.2 Ensure Effective Drugs and Medical Devices
- 3.3 Improve Detection and Treatment Practices for Diseases and Disabilities
- 3.4 Increase Consumer and Patient Use of Health Care Quality Information
- 3.5 Strengthen and Diversify the Base of Well-Qualified Health Care Professionals*
- 3.6 Improve Customer Satisfaction for Consumers in Indian Health Service, Medicare or Medicaid

4 Mitigate and Effectively Respond to Public Health Hazards

- 4.1 Increase the Number of State and Major City Health Departments with Expanded Epidemiology, Surveillance and Communications Capacity to Investigate and Mitigate Health Threats by Bioterrorism

- 4.2 Enhance Information Sharing Capacity, Speed and Accuracy of the Adverse Event Reporting System
- 4.3 Expand and Maintain the Pharmaceutical Stockpile
- 4.4 Rapidly Respond to Public Health Emergencies

5 Decrease Substance Abuse*

- 5.1 Reduce the Abuse and Use of Illicit Drugs
- 5.2 Reduce Alcohol Abuse and Underage Drinking

6 Enhance Quality of Life for Elder Americans

- 6.1 Decrease the Poverty Rate of the Elderly
- 6.2 Decrease the Incidence of Physical Restraints and Pressure Ulcers in Nursing Homes
- 6.3 Improve Health Outcomes of the Elderly
- 6.4 Increase Percentage of Elderly with Access to a Caregiver
- 6.5 Increase Access to Meals and Transportation Services for the Elderly

7 Ensure our Children Are Ready-to-Learn

- 7.1 Improve Emergent Literacy, Numeracy, Language Skills and Motor Skills for Head Start Children
- 7.2 Decrease the Percentage of Low Birth Weight Babies Born
- 7.3 Increase the Percentage of Children Fully Immunized

8 Strengthen American Families and Promote Individual Self-Sufficiency

- 8.1 Increase the Parental Involvement and Financial Support of Noncustodial Parents in the Lives of their Children
- 8.2 Reduce National Rate of Child Abuse while Decreasing Re-occurrence Rates of Abuse after Intervention
- 8.3 Increase the Number of Successful Adoptions in the Public Foster Care System
- 8.4 Decrease the Family Disruption Rate
- 8.5 Increase Economic Independence of Low Income Families

9 Enhance Communities

- 9.1 Increase Volunteerism through HHS Programs
- 9.2 Increase the Amount of non-Federal Resources Brought into Low Income Communities by the Community Services Network
- 9.3 Improve the Public Health and Sanitation Systems in Indian Communities
- 9.4 Enhance Indian Self-Governance

10 TBD

- 10.1 TBD

- *Measures under these goals will be reported for the general population as well as for the American Indian and Alaskan Native populations.*



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10 Department-wide Management Objectives

Purpose: To better integrate HHS management functions to ensure coordinated, seamless, efficient and results-oriented management across all operating and staff divisions of the Department.

1. Results-Oriented Management

- 1.1 Define “End-Outcome” performance measures for all HHS programs by February 1, 2002
- 1.2 Create “Program Logic Models” for all HHS programs by May 1, 2002 to align, through the use of intermediate outcome measures, program contributions to end outcomes
- 1.3 Create performance contracts for all Operating and Staff Division heads by November 1, 2001
- 1.4 Create performance contracts for all career and non-career SES and schedule C staff in managerially relevant roles by January 1, 2002
- 1.5 Identify and propose at least one major program re-organization in each Operating Division using performance-based criteria by October 1, 2002

2. Program Support and Administrative Efficiencies

- 2.1 Maximize consolidation of administrative functions by completing integration of XX% of XX proposed integration actions
- 2.2 Reduce overhead and cost for regional office operations by 15%; finalize detailed plan for reduction of 50% over three years
- 2.3 Complete consolidation of 40 personnel offices to 6
- 2.4 Ensure high-performing OS Executive Office through creation of Service Level Agreements; demonstrate achievement of 90% of SLA targets
- 2.5 Improve the quality of PSC products and services by increasing customer satisfaction by 30% in those services considered of high importance to customers (developmental)
- 2.6 Reduce the costs of PSC products and services by reducing PSC overhead by 10%, with completion of concrete plan for 35% reduction over 3 years
- 2.7 Demonstrate competitiveness of PSC cost structure by documenting through independent blind survey PSC costs are the same or less in 75% of cases than costs of similar products and services offered by competitors
- 2.8 Consolidate the number of Logistics Information Systems from 10 to X
- 2.9 Finalize Department-wide travel and real property policies and procedures and demonstrate full OpDiv and StaffDiv alignment to Department-wide policies and procedures

3. Strategic Human Capital Management

- 3.1 Complete full workforce assessments for each operating and staff division that links workforce allocation to performance goals and targets for the division
- 3.2 De-layer and achieve redeployment of workforce in HHS operating and staff divisions by:
 - Ensuring layers from primary management decision being made to implementation of work do not exceed 3
 - Reducing the manager-employee ratio in department administrative functions from XX:XX to XX:XX
 - Identifying workforce redeployment actions for at least 20% of HHS staff and implementing at least 50% of those redeployments in 2002
- 3.3 Craft strategic “human capital plans” for each operating and staff division with specific recruitment and retention targets for specific skill areas and position types over five years
 - Reduce position vacancies to XX%, reduce time-to-hire to XX days and improve to XX% the number of hires retained after 6 months
 - Increase the number of disabled persons employed by XX
 - Decrease the hiring time for SES positions by XX days
- 3.4 Recommend and award SES rank and merit awards based on achievement of performance goals in performance contracts
- 3.5 Improve EEO compliance by reducing the number of EEO complaints by XX%
- 3.6 Increase the uniformity of labor contracts from 70% to 85%
- 3.7 Consolidate the number of Human Resources Systems from 6 to X
- 3.8 Increase to XX% the percentage of HHS staff receiving training through distance learning vehicles

4. Grants Management

- 4.1 Increase ratio of dollars spent through contracts compared to grants to XX: XX (cascaded into specific goals for Operating Divisions)
- 4.2 Ensure performance measures are linked for XX% of all discretionary HHS grants made annually
- 4.3 Ensure performance measures are linked to XX% of non-discretionary grants made annually
- 4.4 Decrease by 3% the average time for resolving audits
- 4.5 Consolidate grants management as measured by a reduction in the number of grants offices at HHS from XX to XX
- 4.6 Reduce the number of Grants Management Systems from 13 to XX
- 4.7 Generate technical solution for the next phase of Federal Commons and award a contract for fulfillment of technical solution
- 4.8 Streamline application review processes as measured by a cost reduction of XX% and reduction in the percentage of on-site review of non-competing applications
- 4.9 Demonstrate leadership on PL 106-107 by devising a detailed plan for the creation of a consolidated, unified grant application system for all HHS grants

5. Contracting and Competitive Sourcing

- 5.1 Ensure at least 20% of HHS contracted dollars are subject to performance-based contracting criteria
- 5.2 Consolidate the number of Acquisition Management IT Systems from 6 to X
- 5.3 Achieve 100% of SBA goals for
 - Small Businesses XX%
 - 8(A) XX%
 - Small Disadvantaged Business XX%
 - Women-owned small businesses XX%
 - HubZone: XX%
 - Service-Disabled, Veteran-Owned: XX%
- 5.4 Complete competitive sourcing competitions on at least 5% of commercial activities in each operating and staff division
- 5.5 Identify and begin all competitive sourcing competitions needed to ensure full compliance with FY 2003 target of 15%
- 5.6 Increase the average scores on the HHS Acquisition Benchmarking measures by 20%
- 5.7 Expand online procurement to XX%

6. Information Technology Management

- 6.1 Devise and implement a plan with concrete milestones for the attainment of one enterprise-wide information systems architecture by 2004
- 6.2 Expand the practice of enterprise licensing to realize cost savings of XX
- 6.3 Reduce Total Cost of Ownership of IT systems by XX%
- 6.4 Ensure XX% of HHS systems are compliant with security safeguards while reducing the number of security events to XX
- 6.5 Create integrated HHS search engine to fully link all major HHS websites
- 6.6 Reduce through integration the following systems:
 - 7 networks to X
 - 1000 data circuits to X
 - 115 T1 lines to X
 - 8 Network operating systems to X
 - XX help desks to XX
 - XX computer rooms to XX
 - 3100 servers to XX

7. Improved Financial Management

- 7.1 Consolidate the number of Financial Management IT Systems from 5 to X
- 7.2 Increase by 10% the amount of total debt collected
- 7.3 Establish baseline for payment error rate in each Operating Division area and target and strategize for reduction. Specifically in 2002:
 - Achieve payment error rate of .03% or less on administrative transactions and acquisitions
 - Achieve payment error rate of XX% or less in the TANF program
 - Achieve payment error rate of XX% or less on Medicare transactions

8. Improved Facility Management and Security

- 8.1 Devise emergency management plan to ensure continuous Department operation in most likely emergency scenarios
- 8.2 Ensure XX% of HHS organizations fall below the federal government average workers compensation lost time claims rate
- 8.3 Reduce energy consumption in accordance with the Energy Policy Act and relevant executive orders by XX%
- 8.4 Ensure 100% of building maintenance requests or complaints are addressed within 72 hours
- 8.5 Ensure compliance with DOJ level-special minimum security requirements in XX% of audits of security
- 8.6 Improve to XX the employee satisfaction with security services (developmental)

9. Faith-Based Partnerships

- 9.1 Increase the number of faith-based organizations receiving funding or serving in partnership roles with the Department by 10%
- 9.2 Devise detailed plans for ACF, AoA, SAMHSA, HRSA, CDC, and IHS complete with milestones for improving the capacity of faith-based organizations to partner with the government

10. Enhanced Research and Development Practices

- 10.1 Devise and implement a Research Capability Maturity Model (RCM2) for use in all HHS research activities (developmental)
- 10.2 Establish baselines and targets for 2003 improvements in performance of HHS management of research and development projects as tracked by the RCM2 (developmental)
- 10.3 Devise policies and procedures in relevant Operating Divisions that link grant review criteria in a consistent manner for research and development projects to RCM2